

# **Service 24/7**

## **Insured Access Guide**

Access your Insurance Agent's web site using the **URL** the agency has provided you. Click on the **Service 24/7** Link.

You will need to enter your Email Address and Password assigned to you by your Agent. If you have forgotten your password, you can enter your email address and click on the "Forgot your Password" link and you will be sent a temporary password.



**Service 24/7 Login**

Email:

Password:

[Forgot your password?](#)

From the '**Welcome Menu**', select the feature that you want to use.

**Welcome**

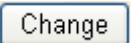
- [Manage Login](#)  
Change Password
- [Manage Users](#)  
Manage users and logins.
- [Customer](#)  
View/Edit customer information
- [Accounting](#)  
View basic accounting information including payments, open invoices and direct bill payments
- [Policies](#)  
View/Edit basic policy information. Add/Edit/Delete Vehicles. Add/Edit/Delete Locations. Add/Edit/Delete Drivers.
- [View/Print Certificates of Insurance](#)  
View/Print certificates, add holders to existing certificates, edit holders displayed on existing certificates.
- [View/Print Auto Id Cards](#)  
View/Print Auto Id cards. Issue New Auto Cards.
- [View Existing Claims](#)  
View existing claims.
- [Report Claim](#)  
Report new claim to agent.
- [Fax Log](#)  
View fax log.
- [Ask a Question](#)  
Ask a question.

## Manage Login - Service 24/7 Change Password

Clicking the **Manage Login** option from the [Welcome Menu](#) opens the **Service 24/7 Change Password** form. This form allows you to change the password that has been given to you by your insurance agency. The password accompanies your email address when logging on to **Service 24/7**. The password is not case-sensitive and there are no restrictions as to password length or design.

To change your password, do the following:

- Complete all fields to successfully change the password.

| Field               | What is this?                                                                                                                                                                                                                    |
|---------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Old Password</b> | Type your old password. <ul style="list-style-type: none"><li>• If you incorrectly enter the old password an error message: '<b>The old password did not match,</b>' displays when you click the <b>Change</b> button.</li></ul> |
| <b>New Password</b> | Type the new password.                                                                                                                                                                                                           |
| <b>New Password</b> | Retype the new password.                                                                                                                                                                                                         |
| <b>Change</b>       | Click the  button. A message displays confirming that the password was successfully changed.                                                  |

## Manage Users

If you have been given permission by the agency, you can now determine who is an **Authorized User** to view your account. You can **Add**, **Edit** or **Delete** users from the ' **Manage Users** 'link.

Service 24/7 - Accounts - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Back Forward Stop Home Search Favorites Media

Address <https://www.service247.ams360.com/v1/userlist.asp> Go Links Customize Links Free Hotmail Windows Windows Media

Service 24/7 Always Open!

[Pending Requests](#) [Main](#) | [Help](#) | [Logout](#)

Monday, February 23, 2004

### Users

[Add](#)

| Name ▲         | Email Address           | Edit | Delete |
|----------------|-------------------------|------|--------|
| Joe Smith      | cvimpany@amsworld.com   |      |        |
| Lisa Nicholson | lnicholson@amsworld.com |      |        |
| Penny Teelers  | pteelers@amsworld.com   |      |        |

Internet

## Customer

From the '**Customer Menu**', you can view your account information.

Click **Edit**

The screenshot shows the 'Customer Information' page. At the top left is the 'Service 24/7' logo with the tagline 'Always Open!'. At the top center is a red-bordered box containing the text 'Pending Requests'. At the top right are links for 'Main | Help | Logout' and the date 'Tuesday, June 01, 2004'. The main content area is titled 'Customer Information' and has an 'Edit' link in the top right corner. It is divided into several sections: 'General Information' (Name: David and Penny Teeters, Firm Name: 33 West Palm, Address: Seattle WA, 98011, Business: (425)402-1000 Ext.342, Residence: (425)823-9999, Cell, Fax, Pager, Email: pteeters@amsworld.com), 'Agency Personnel' (Account Executive: Teeters, Penny, Account Representative: Teeters, Penny, Email), 'Contacts' (No Contacts Found), and 'Dependents' (No Dependents Found).

This will open the '**Edit Customer Information**' form to make the changes necessary. An example of a change in this area might be an address change, email address or telephone number addition/change.

The screenshot shows the 'Edit Customer' form. At the top left is the 'Service 24/7' logo. At the top center is a red-bordered box containing the text 'Pending Requests'. At the top right are links for 'Main | Help | Logout' and the date 'Tuesday, June 01, 2004'. The main content area is titled 'Edit Customer' and has 'Send' and 'Cancel' links in the top right corner. It is divided into several sections: 'Requested Effective Date' (06/01/2004), 'First' (David and Penny), 'Middle', 'Last' (Teeters), 'Firm Name', 'DBA' (Teeters Painting Contractors), 'Address' (33 West Palm), 'City' (Seattle), 'State' (WA), 'Zip' (98011), 'County' (KING), 'Phone Numbers and Email' (Residence: (425)823-9999, Business: (425)402-1000, Fax, Cell, Pager, Email: pteeters@amsworld.com), and 'Additional Information or Remarks'.

In the '**Remarks**' section, type what change is actually being requested, such as Address Change, Telephone Number Change, etc. This will assist the agency personnel in processing your request.

Click **Send**.

## Policies

The **Select a Policy** web page appears when you choose **Policy** from the **Welcome** menu web page in **Service 24/7**. This web page displays a list of your policies for the past two years. To view and possibly change the details of a policy, click the policy number.



[Pending Requests](#)

[Main](#) | [Help](#) | [Logout](#)

Tuesday, June 01, 2004

| Select a Policy |            |                                   |                   |         |                         |
|-----------------|------------|-----------------------------------|-------------------|---------|-------------------------|
| Previous        |            | Next                              |                   |         | 1                       |
| Effective       | Expiration | Policy #                          | Policy Type       | Company | Total Cost of Insurance |
| 03/25/2004      | 03/25/2005 | <a href="#">PACKAGE</a>           | Business Auto     | Aetna   | 0.00                    |
| 04/07/2004      | 04/07/2005 | <a href="#">GENERAL LIABILITY</a> | General Liability | Aetna   | 0.00                    |

\*Note: Current list of policies are based on 06/01/2004. This list will not include: Cancelled, Non-renewed or Future Dated Policies.

After you click a policy number, the policy detail appears.

View Policy

[Business Auto](#) [BOP Property](#)

Basic Policy Information

Policy #:

Term:

Tran Date:

Tran Type:

Tran Description:

Policy Type:

Parent Company:

Writing Company:

Total Premium:

Total Cost of Insurance:

PACKAGE

03/25/2004 - 03/25/2005

03/25/2004

New business

New business

Business Auto

Aetna

Aetna

\$0.00

\$0.00

Agency Personnel

Account Executive: Penny Teeters

Email:

Account Representative: Penny Teeters

Email:

First Named Insured

Name:

Firm Name:

DBA:

Dec Name:

Address:

Business:

Residence:

Cell:

Fax:

Email:

David and Penny Teeters

Teeters Painting Contractors

David and Penny Teeters, DBA: Teeters Painting Contractors

19015 North Creek Parkway

Bothell WA, 98011

(425)402-1000 Ext.342

(425)823-9999

Location Information

Loc #00001 Bldg #00001:

19015 North Creek Parkway, Bothell, WA, 98011

[Add](#)

[Edit](#)

[Delete](#)

The policy detail will display. To edit an existing location, auto, loss payee, etc, click on the edit button  make the changes and click on **send**. To add; click on the add link [Add](#), make the changes and click on **send**. To delete; click on the delete button  type in the deletion in the Additional Information or Remarks box and click on **send**.

## Certificates of Insurance

From the **Welcome** web page, click **View/Print Certificates of Insurance** to open the web page.

| View/Print/Fax Certificates of Insurance         |         |            |                                                |
|--------------------------------------------------|---------|------------|------------------------------------------------|
| Holder                                           | Address | Issue Date |                                                |
| ▶ Liability 4/7/04, Service 24/7                 |         |            | <a href="#">Add Holder</a> <a href="#">Fax</a> |
| Please refresh page to see any new Certificates. |         |            |                                                |

To Add a holder you will click on the “Add Holder” link.

| Master Certificate Columns | What is this?                                                                                                                                                                      |
|----------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| ▶                          | Click this icon to expand and display the holders for the certificate.                                                                                                             |
| Certificate Number         | The certificate number is a link that you can use to open the Master Certificate in a <a href="#">pdf</a> view.                                                                    |
| Description                | If your insurance agency has entered a description for the certificate it appears immediately following the certificate number. The description helps to identify the certificate. |
| Date                       | The date indicates when the certificate was last changed or printed.                                                                                                               |
| Add Holder                 | Click this link to open the <a href="#">Add Certificate Holder</a> page where you can add a holder to the selected certificate.                                                    |
| Fax                        | Click this link to open the Fax Certificate form so you can send the form to the fax number you enter.                                                                             |

The following dialog will display, complete the information and click on **"Send"**.

| Add Certificate Holder                                                      |                             |
|-----------------------------------------------------------------------------|-----------------------------|
| Certificate #: Liability 4/7/04 <a href="#">Send</a> <a href="#">Cancel</a> |                             |
| Certificate Issue Date                                                      | Written Notice              |
| *Date Issued: 06/01/2004                                                    | # of Days: 30               |
| Select Holder:                                                              |                             |
| *Holder Name:                                                               |                             |
| Contact:                                                                    |                             |
| Address:                                                                    |                             |
| City:                                                                       | State: <input type="text"/> |
| Zip:                                                                        | Email: <input type="text"/> |
| Fax:                                                                        | Ext: <input type="text"/>   |
| Description of Operations:                                                  |                             |
| Service 24/7                                                                |                             |
| Additional Information or Remarks:                                          |                             |
|                                                                             |                             |
| *Required Fields                                                            |                             |

To print a certificate of insurance, click on the  to expand & display the list of certificate holders for that certificate. Once the list is displayed, click on the holder you want to print and the certificate of insurance will open in PDF format and you can print or email.

| View/Print/Fax Certificates of Insurance                                                        |         |            |
|-------------------------------------------------------------------------------------------------|---------|------------|
| Holder                                                                                          | Address | Issue Date |
| <a href="#">▶ Liability 4/7/04, Service 24/7</a> <a href="#">Add Holder</a> <a href="#">Fax</a> |         |            |
| Please refresh page to see any new Certificates.                                                |         |            |

## Automobile ID Cards

From the **Welcome** web page, click **View/Print Auto ID Cards** to open the web page. T

| State                                             | Vehicle Information | Fax |
|---------------------------------------------------|---------------------|-----|
| 00001, 2000, Isuzu, Trooper, 3434938493489384393  |                     | Fax |
| 00001, 1999, Peterbilt, Tractor, PE28962458962498 |                     | Fax |
| 00002, 1998, Ford, Focus, 34343434343434          |                     | Fax |
| 00007, 2000, Isuzu, Trooper, 3434938493489384393  |                     | Fax |
| 00007, 2000, Isuzu, Trooper, 3434938493489384393  |                     | Fax |
| 00007, 2000, Isuzu, Trooper, 3434938493489384393  |                     | Fax |
| 00002, 1998, Ford, Focus, 34343434343434          |                     | Fax |
| 00002, 1998, Ford, Focus, 34343434343434          |                     | Fax |
| 00002, 1998, Ford, Focus, 34343434343434          |                     | Fax |
| 00002, 1998, Ford, Focus, 34343434343434          |                     | Fax |

Please refresh page to see any newly issued Auto Id Cards.

To issue a new auto ID card for a vehicle currently on the policy, click the "Issue New Card" link. The following dialog will display.

☐ Fleet

00001,2000,Isuzu/Trooper,3434938493489384393,  
00002,1998,Ford/Focus,3434343434343434,

\* State:

\* Form:

**Name on Card:**

☒ Name on Policy

☐ Primary Driver

☐ DBA Name

☐ Co-Insured On Policy

**Address on Card:**

☐ My Address

☒ Garage Address

☐ Policy Address

Select the vehicle you want to issue a card, select the State & Form, change the Name & Address if needed and click on "create". Close the Submission Successful dialog.

To print the new auto ID card you will need to click "refresh"  on your web browser to display the selected auto. Click on the vehicle and the auto ID card will open in PDF format which will allow you to email or print.

## [Report New Claim](#)

From the **Welcome** web page, click **Report Claims** to open the web page.

**Report New Claim**Send Cancel

\*Requested Effective Date: 06/01/2004

In order to report a claim to your Insurance Carrier we will need the following information:

\*What date did your loss occur:

Time:

What caused your loss:

What (if any) Authority was Contacted (Police, Fire Department, etc):

Please provide a report, ticket or case number if one was given by authority:

What was the location of the loss:

Which of the following best describes your loss:

☐ Loss to Business Vehicle

☐ Loss to a Business Property

☐ Liability Loss

☐ Loss to Personal Vehicle or Watercraft

☐ Loss to a Personal Property

☐ Workers Compensation Loss

Description of Loss:

Additional Information or Remarks:

\*Required Fields

Complete the information and click on **"Send"**, see chart on next page for a description of the fields.

## Description of Claim Fields

| Report New Claim Fields                                                              | What is this?                                                                                                                                                                                                                                                 |
|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Requested Effective Date</b>                                                      | Today's date appears here indicating the date you are notifying your insurance agent of the loss or accident.                                                                                                                                                 |
| <b>Send</b>                                                                          | When you finish entering the claim information, click this link to send the information to your insurance agent.                                                                                                                                              |
| <b>Cancel</b>                                                                        | Stops the claim reporting process, closes the <b>Report New Claim</b> data entry form, and returns you to the <b>Welcome</b> menu web page                                                                                                                    |
| <b>What date did your loss occur</b>                                                 | Enter the date and time of the loss or accident.                                                                                                                                                                                                              |
| <b>Time</b>                                                                          |                                                                                                                                                                                                                                                               |
| <b>What caused your loss</b>                                                         | From the list, choose the item that most closely matches the reason your loss occurred.                                                                                                                                                                       |
| <b>What (if any) Authority was Contacted (Police, Fire Department, etc)</b>          | The name of the police, fire, or emergency agency contacted, if applicable.                                                                                                                                                                                   |
| <b>Please provide a report, ticket, or case number if one was given by authority</b> | The number assigned by the police, fire, or emergency agency to whom the report was made.                                                                                                                                                                     |
| <b>What was the location of the loss</b>                                             | <p>Enter where your loss or accident occurred; include street names, addresses, and nearest cross street.</p> <ul style="list-style-type: none"> <li>List only the location. You can enter a description of the loss or accident in another field.</li> </ul> |
| <b>Which of the following best describes your loss</b>                               | Select one of the choices listed. Your selection will assist your insurance agent in determining the policy that covers the loss or accident that occurred.                                                                                                   |
| <b>Description of Loss</b>                                                           | Describe the accident. As a guideline, be sure to include who was involved and what occurred.                                                                                                                                                                 |
| <b>Additional Information or Remarks</b>                                             | Use this area for any additional information that you think will assist your insurance agent in processing the claim.                                                                                                                                         |

## [Ask a Question](#)

You can use this area to ask a question **without making any changes** to your account. This might be used to request a quote for an additional vehicle or change in coverage or any other type of request that does not actually affect your account or policies.

## [How to Know Your Request Has Been Received by the Agency and Processed](#)

When you send a request to your insurance agent to make any changes or ask a question, you will receive a message similar to the following:



[Pending Requests](#)

[Main](#) | [Help](#) | [Logout](#)

Saturday, March 13, 2004

### **Submission Successful**

Thank you for submitting your Edit Customer.

Server Time: 3/13/2004 12:48:24 AM

Your change will take affect on Service 24/7 after your insurance agent has processed your request (allow for processing time). Please do not repeat this operation as this will create a duplicate request

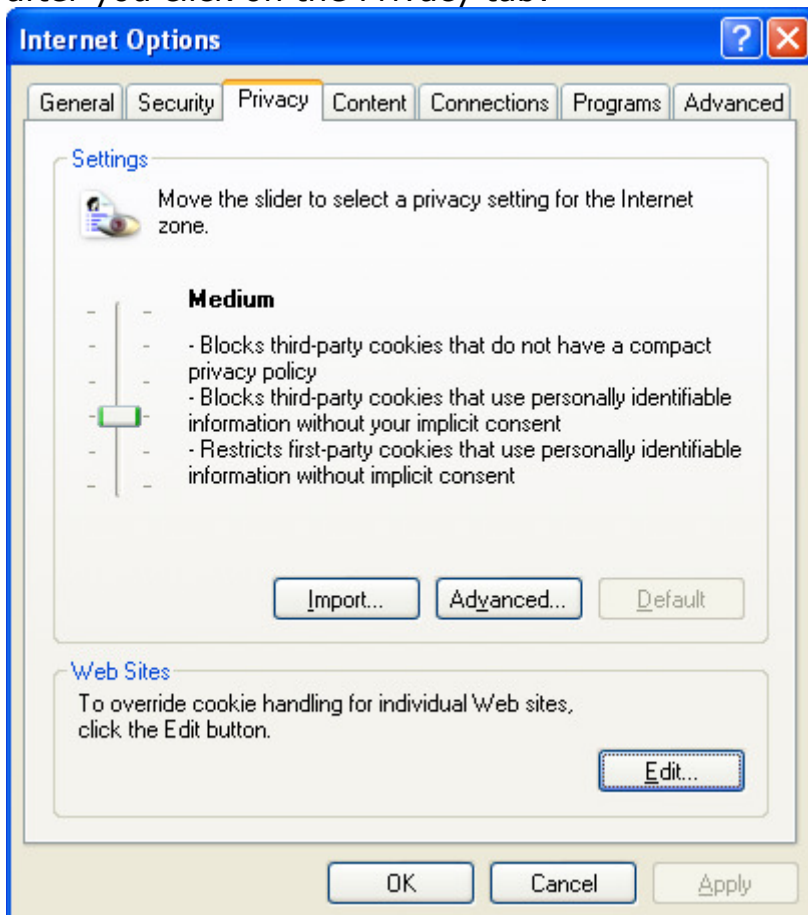
***Notice the [Pending Requests](#) link at the top of the page. Clicking on this link will show you any requests you have requested that have not been processed by your agent. Once the agent has processed your request, the request(s) will no longer appear. If there are no [Pending Requests](#), you will not see this link at all.***

## Troubleshooting

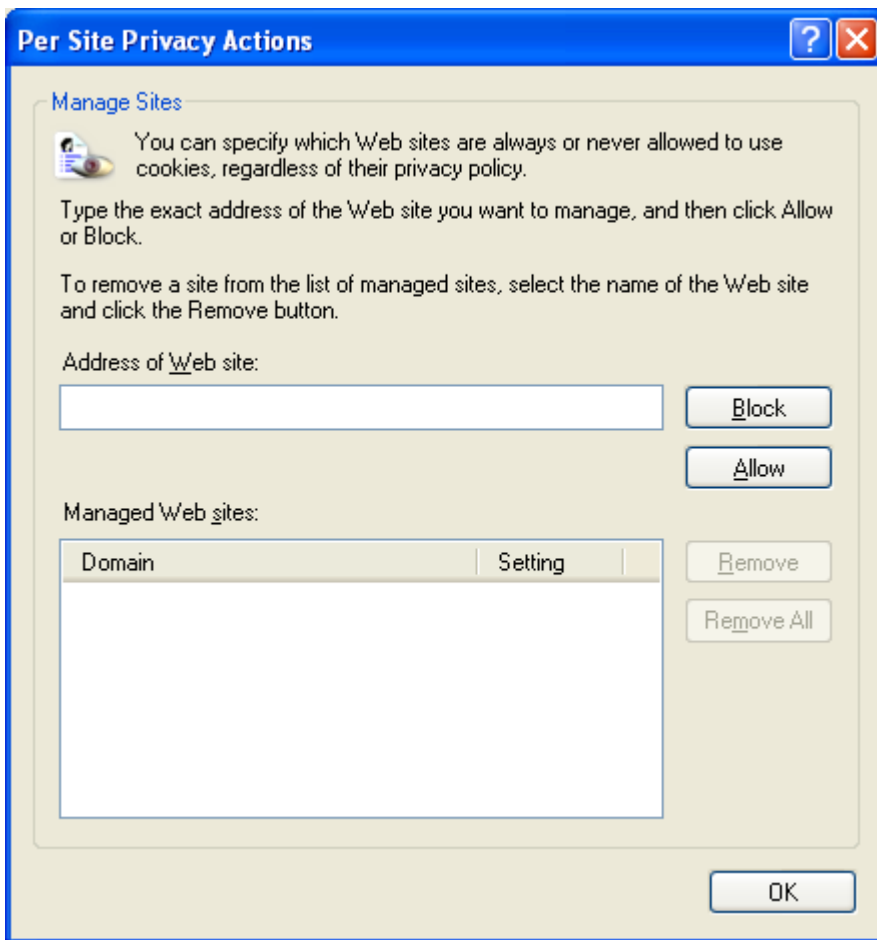
Service 24/7 has features that take full advantage of Microsoft's web browser, Internet Explorer. With the understandable and critical concern that users of the Internet have on security Microsoft has added a number of features to Internet Explorer and to Windows XP that enhance your security. Some of these settings however can prevent key business applications like Service 24/7 from functioning properly. Fortunately, Microsoft has also implemented methods that will allow you to "trust" certain web sites.

## Cookies

In order to use Service 24/7 you must allow cookies. Cookies are used by the Internet programs and websites to save information about that site while you are visiting. Some people restrict the use of cookies on their workstation. If you are restricting cookies on your workstation, it is possible to allow them from certain websites, like Service 24/7. To adjust the cookies you allow, open Internet Explorer and select Tools > Internet Options. The following screen will appear after you click on the Privacy tab:



Click on the Edit button toward the bottom of the screen in the Web Sites section. The following screen appears:



The dialog box is titled "Per Site Privacy Actions" and contains a "Manage Sites" section. It includes instructions on how to manage web site cookies, a text input field for the "Address of Web site", and a table for "Managed Web sites".

**Manage Sites**

You can specify which Web sites are always or never allowed to use cookies, regardless of their privacy policy.

Type the exact address of the Web site you want to manage, and then click Allow or Block.

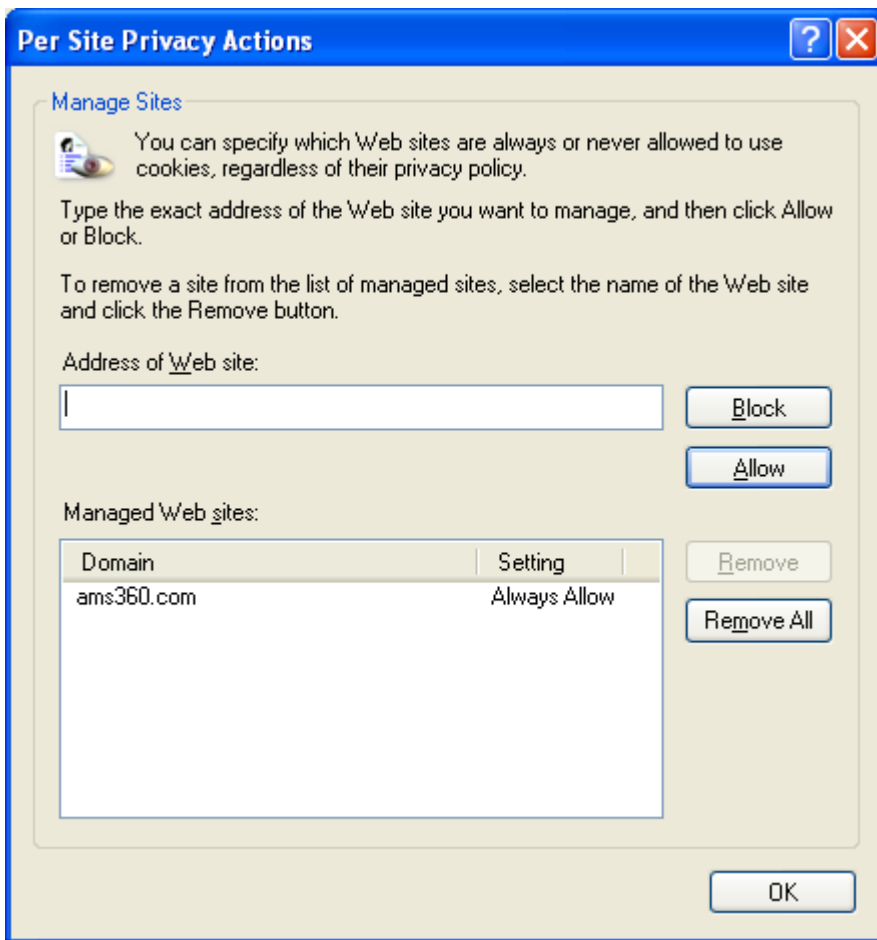
To remove a site from the list of managed sites, select the name of the Web site and click the Remove button.

Address of Web site:

Managed Web sites:

| Domain | Setting |
|--------|---------|
|--------|---------|

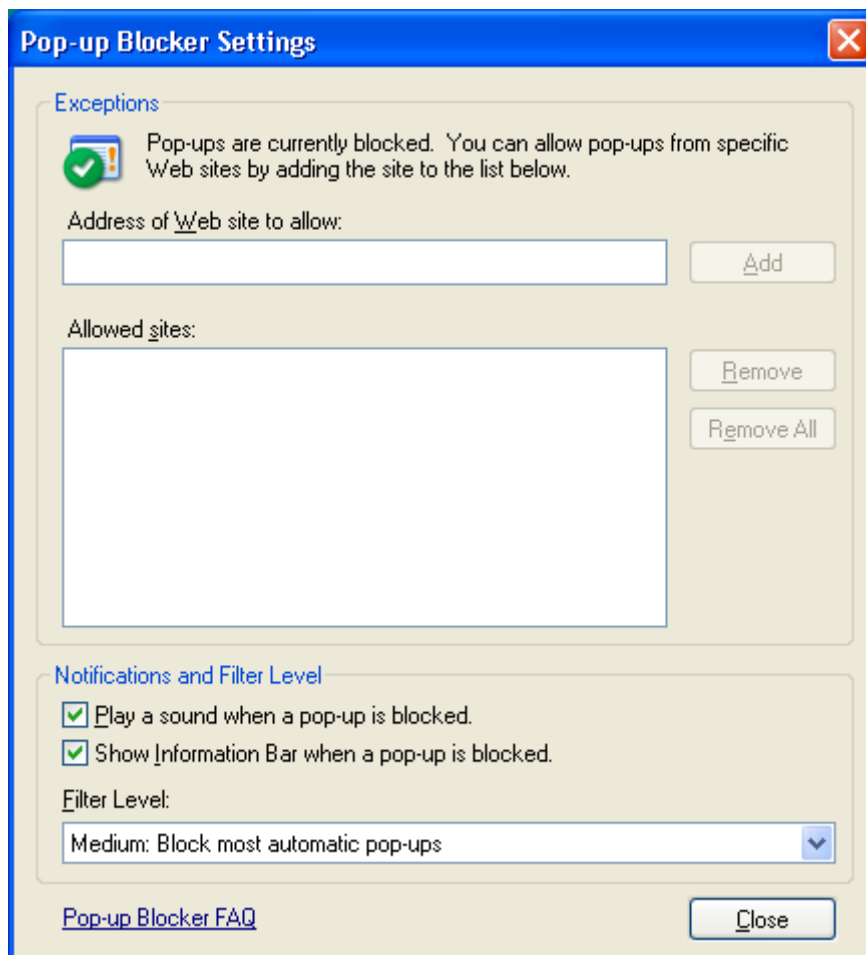
In the *Address of the Web Site* field, type *ams360.com*. Click on the Allow button. When completed, your screen should look like this:



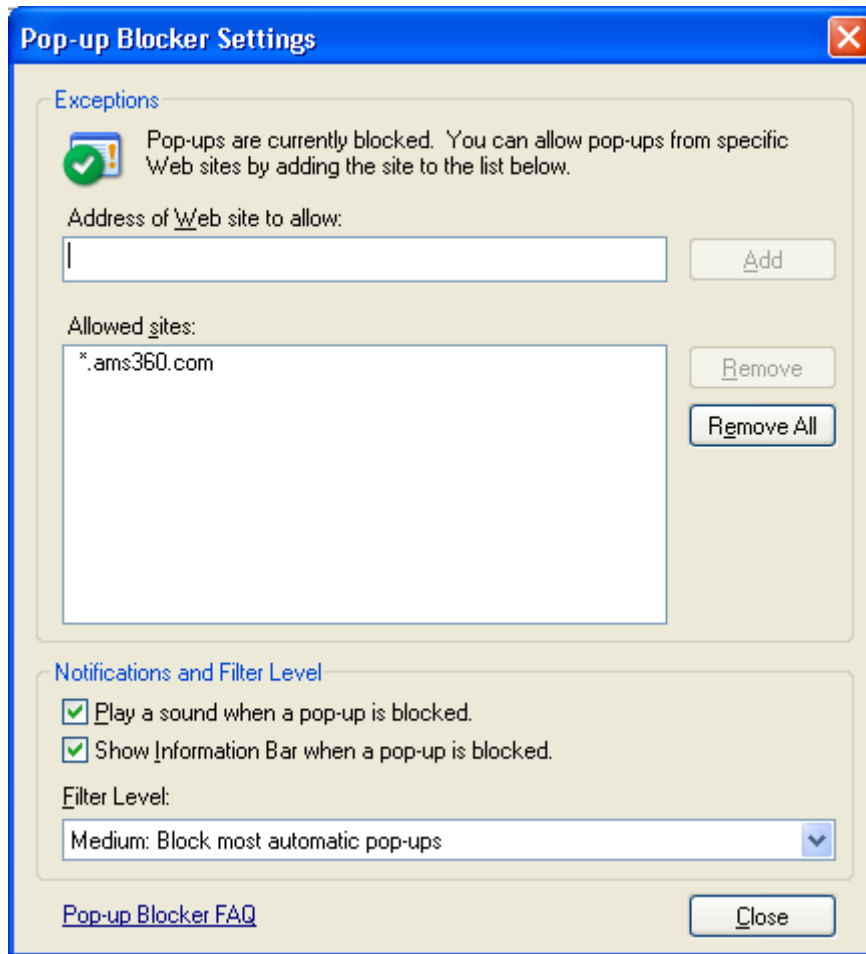
Click on Ok to save the information, then on Ok to close the Internet Options screen.

## **Pop-up blocker**

As part of Service Pack 2, Microsoft has added the Internet Explorer Pop-up Blocker program. There are a number of areas in Service 24/7 that will be blocked unless action is taken as the Pop-up blocker is enabled by default. To configure the Internet Explorer Popup Blocker to allow pop-ups from Service 24/7, open Internet Explorer and click Tools > Pop-up Blocker > Pop-Up Blocker Settings. The following screen will appear:



In the *Address of Web site to allow* field, type *ams360.com* and click on the Add button. When complete, the screen should look like this:



Just click the Close button to save this information.

## **Firewall software**

Another potential issue involves the use of software or hardware firewalls. Any of these devices (including the free one that was installed with Windows XP Service Pack 2) can block particular web sites if you wish. They generally will not do so without your input, but if you have problems reaching the Service 24/7 web site, you should check your firewall to be sure it is not blocking the *ams360.com* web site. Each of these products is different, so screen images are not really possible. Please review your owners or user manual for your firewall product if you continue to have difficulties.